

239913

**AUTHORIZED UTILITY REPRESENTATIVE FORM FOR TELECOMMUNICATIONS CARRIERS**  
 TYPE: ☒ IXC      ☒ CLEC      ☐ ILEC      ☐ Wireless

**CERTIFICATED COMPANY INFORMATION**

<u>Entelegent Solutions, Inc.</u>	
Company Name <u>same</u>	FEIN/SSN <u>704-909-6410</u>
Dbafka <u>3800 Arco Corporate Drive, Ste. 310</u>	Telephone # _____
Mailing Address <u>Charlotte, NC 28273</u>	
City, State, Zip Code <u>same</u>	
Business Location <u>same</u>	
City, State, Zip Code _____	County <u>same</u>

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 PSC SC  
 CLERK'S OFFICE

**REGISTERED AGENT INFORMATION**

Registered Agent: _____
Mailing Address: _____
City, State, Zip Code _____

**Pursuant to the Commission's rules and regulations, print or type company contact for the following areas:**

- Jeffrey A. Harnack
- A. **General Manager** (Include Address if different than above)  
704-909-6410 / 704-504-5868 / regulatory@entelegent.com  
 Telephone Number / Facsimile Number / E-mail Address  
Lisa Brown
- B. **Customer Relations/Complaints Representative** (Include Address if different than above)  
704-909-6402 / 704-504-5868 / lisa.brown@entelegent.com  
 Telephone Number / Facsimile Number / E-mail Address  
Bo Wheeler
- C1. **Customer Relations/Complaints Representative for Escalated Complaints** (Include Address if different than above)  
704-323-7463 / 704-504-5868 / bo.wheeler@entelegent.com  
 Telephone Number / Facsimile Number / E-mail Address  
800-975-7192
- C2. **Customer Contact** (Toll Free Number)  
Jeffrey A. Harnack
- D. **Engineering Operations** (Include Address if different than above)  
704-323-7462 / 704-504-5868 / jeff.harnack@entelegent.com  
 Telephone Number / Facsimile Number / E-mail Address  
Lisa Brown
- E. **Test and Repair** (Include Address if different than above)  
704-909-6402 / 704-504-5868 / lisa.brown@entelegent.com  
 Telephone Number / Facsimile Number / E-mail Address  
Michael Ruziska
- F. **Emergencies** (During Non-Office Hours)  
800-975-7192 / 704-504-5868 / michael.ruziska@entelegent.com  
 Telephone Number / Facsimile Number / E-mail Address

**In addition, please provide the following company contact information to assist in proper routing of correspondence and invoices:**

G. Jeffrey A. Harnack  
**Regulatory Officer** (Include Address if different than above)  
704-909-6410 / 704-504-5868 / regulatory@entelegent.com  
Telephone Number / Facsimile Number / E-mail Address  
same as Regulatory Officer

H. **Dual Party Mailings** (Name)  
  
(Mailing Address)  
  
Telephone Number / Facsimile Number / E-mail Address  
same as Regulatory Officer

I. **Interim LEC Fund Mailings** (Name)  
  
(Mailing Address)  
  
Telephone Number / Facsimile Number / E-mail Address  
same as Regulatory Officer

J. **Universal Service Fund Mailings** (Name)  
  
(Mailing Address)  
  
Telephone Number / Facsimile Number / E-mail Address  
same as Regulatory Officer

K. **Gross Receipts Mailings** (Name)  
  
(Mailing Address)  
  
Telephone Number / Facsimile Number / E-mail Address  
same as Regulatory Officer

L. **Lifeline Mailings** (Name)  
  
(Mailing Address)  
  
Telephone Number / Facsimile Number / E-mail Address

Jeffrey A. Harnack

**This form was completed by**  
**Regulatory and Compliance**  
**Title**

Jeffrey A. Harnack  
Signature

10-18-2012  
Date

RETURN COMPLETED FORM TO:

Public Service Commission of SC  
**Docketing Department**  
Post Office Drawer 11649  
Columbia, South Carolina 29211

And  
Office of Regulatory Staff  
**Attn: Jeanne Gordon**  
1401 Main Street, Suite 900  
Columbia, South Carolina 29201